

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

FREEDOM PROJECT; THE

ADDRESS (number and street)

631-B Pennsylvania Ave., SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

0003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00305805

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2009

through

08

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Margee Clancy

Signature of Treasurer

Electronically Filed by Margee Clancy

Date

09

18

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name  
FREEDOM PROJECT; THE

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	119660.20
(b) Cash on Hand at Beginning of Reporting Period .....	258676.86	
(c) Total Receipts (from Line 19) .....	27453.00	825982.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	286129.86	945642.30
7. Total Disbursements (from Line 31) .....	35377.02	694889.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	250752.84	250752.84
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	4365.93	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

FREEDOM PROJECT; THE

Report Covering the Period:

From:

M M  
0 8D D  
0 1Y Y Y Y  
2 0 0 9

To:

M M  
0 8D D  
3 1Y Y Y Y  
2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	15700.00	175900.00
(ii) Unitemized .....	485.00	8777.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	16185.00	184677.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	10000.00	609750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	26185.00	794427.00
12. Transfers From Affiliated/Other Party Committees .....		0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1268.00	26079.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5475.60
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27453.00	825982.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27453.00	825982.10

## DETAILED SUMMARY PAGE

of Disbursements

4 / 24

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	30377.02	420977.49	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	30377.02	420977.49	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	218412.20	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	2900.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	5000.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	7900.00	
29. Other Disbursements.....	0.00	47599.77	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35377.02	694889.46	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35377.02	694889.46	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	26185.00	794427.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	7900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26185.00	786527.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30377.02	420977.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1268.00	26079.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	29109.02	394897.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Wiley Rein LLP

Mailing Address 1776 K Street NW

City State Zip Code  
 Washington DC 20006-2304

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI-3634-21144-c

Amount of Each Receipt this Period

1500.00

Partnership (see memo ent-  
 ry)

**B.**

Full Name (Last, First, Middle Initial)  
 Rebecca Anderson

Mailing Address 3525 17th Street S

City State Zip Code  
 Arlington VA 22204-5003

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Williams & Jensen, PLLC

Occupation  
 Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI-6354-21141-c

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 Thomas Beddow

Mailing Address 19 Edinburgh Lane

City State Zip Code  
 Pinehurst NC 28374-6714

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 NA

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI-4458-21148-c

Amount of Each Receipt this Period

2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE**A.**

Full Name (Last, First, Middle Initial)

Bob Brooks, Jr.

Mailing Address 1107 North Pitt Street  
Unit CCity State Zip Code  
Alexandria VA 22314FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpine GroupOccupation  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI-10097-21142-c

Amount of Each Receipt this Period

2000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Duane Duncan

Mailing Address 3900 Wisconsin Avenue NW

City State Zip Code  
Washington DC 20016-2806FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fannie MaeOccupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI-5550-21150-c

Amount of Each Receipt this Period

2000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Griffith

Mailing Address 3417 Milam Street

City State Zip Code  
Houston TX 77002-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Richard S. GriffithOccupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI-11179-21153-c

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

4200.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM PROJECT; THE**

**A.**

Full Name (Last, First, Middle Initial)  
 Gregg Hartley

Mailing Address 4037 35th Street, N

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Cassidy & Associates

Occupation  
 Vice Chairman & COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI-4022-21149-c

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 Shahira Knight

Mailing Address 209 Pennsylvania Avenue

City State Zip Code  
 Falls Church VA 22046-3241

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SIFM Assoc.

Occupation  
 Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI-10249-21147-c

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 Morongo Band of Mission Indians

Mailing Address PO Box 366

City State Zip Code  
 Cabazon CA 92230-0366

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Indian Tribe

Occupation  
 Indian Tribe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI-9802-21145-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Carol Laham

Mailing Address 1776 K Street NW

City

Washington

State

DC

Zip Code

20006-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wiley Rein LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI-11256-21144-P

Amount of Each Receipt this Period

1500.00

## **[MEMO ITEM]**

Partnership Subitemization  
of Wiley Rein LLP

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

15700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 24

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Corrections Corporation of America CCA-PAC

Mailing Address 10 Burton Hills Boulevard

City State Zip Code  
 Nashville TN 37215-6105

FEC ID number of contributing  
federal political committee. **C** C00366468

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11C-10771-21151-c

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE

Mailing Address 714 Green Valley Road

City State Zip Code  
 Greensboro NC 27408-7018

FEC ID number of contributing  
federal political committee. **C** C00112888

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11C-4002-21146-c

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 24

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
 Capitol Associates III-X

Mailing Address 426 C Street NE

City State Zip Code  
 Washington DC 20002-5818

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 4 / 2 0 0 9

Transaction ID: SA15-4390-21143-e

Amount of Each Receipt this Period

1250.00

Vendor refund

**B.**

Full Name (Last, First, Middle Initial)  
 Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
 Suite A

City State Zip Code  
 Mclean VA 22101-5737

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23017.57

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 0 / 2 0 0 9

Transaction ID: SA15-10391-21163-e

Amount of Each Receipt this Period

18.00

Bank fee refund

**SUBTOTAL** of Receipts This Page (optional) .....

1268.00

**TOTAL** This Period (last page this line number only) .....

1268.00

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT: THE

536.18

93.14

3679.14

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10391-21140-e

Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

1501.34

B.

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Bank fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10391-21164-e

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

67.00

C.

Full Name (Last, First, Middle Initial)

Chain Bridge Bank

Mailing Address 1445 Laughlin Avenue  
Suite A

City Mclean State VA Zip Code 22101-5737

Purpose of Disbursement

Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10391-21175-e

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1501.34

SUBTOTAL of Disbursements This Page (optional) ▶

3069.68

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Payroll processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6282-21132-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)  
Clark, Schaefer, Hackett & Company

Mailing Address 160 N Breiel Boulevard

City Middletown State OH Zip Code 45042-3806

Purpose of Disbursement  
Payroll processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-6282-21165-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

55.00

**C.**

Full Name (Last, First, Middle Initial)  
Commonwealth of Virginia

Mailing Address PO Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement  
Payroll taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-8564-21166-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

348.58

**SUBTOTAL** of Disbursements This Page (optional) .....

458.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)  
EDONATION

Mailing Address 118 N. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Website contribution processing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-10939-21154-e  
Date of Disbursement

08 / 01 / 2009

Amount of Each Disbursement this Period

4.00

**B.**

Full Name (Last, First, Middle Initial)  
Mastercard

Mailing Address PO Box 42070

City Middletown State OH Zip Code 45042-0070

Purpose of Disbursement  
Finance charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3605-10730-V  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

214.35

**[MEMO ITEM]**

Subitemization of Mastercard

**C.**

Full Name (Last, First, Middle Initial)  
Mastercard

Mailing Address PO Box 42070

City Middletown State OH Zip Code 45042-0070

Purpose of Disbursement  
Credit card (see memo entries)

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-3605-21156-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

3986.63

**SUBTOTAL** of Disbursements This Page (optional) .....

3990.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	<b>Transaction ID:</b> SB21B-9144-21190-e <b>Date of Disbursement</b>																				
Mailing Address 1701 Esquire Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	0	9												
City Mclean State VA Zip Code 22101-4755	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Bookkeeping & compliance Candidate Name	<table border="1"> <tr> <td colspan="10">2543.08</td> </tr> </table>	2543.08																			
2543.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) New Media Communications	<b>Transaction ID:</b> SB21B-7123-21193-e <b>Date of Disbursement</b>																				
Mailing Address 3046 Brecksville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	2		2	0	0	9												
City Richfield State OH Zip Code 44286-9399	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website contribution processing Candidate Name	<table border="1"> <tr> <td colspan="10">0.70</td> </tr> </table>	0.70																			
0.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) New Media Communications	<b>Transaction ID:</b> SB21B-7123-21188-e <b>Date of Disbursement</b>																				
Mailing Address 3046 Brecksville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	0	9												
City Richfield State OH Zip Code 44286-9399	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website contribution processing Candidate Name	<table border="1"> <tr> <td colspan="10">14.00</td> </tr> </table>	14.00																			
14.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2557.78

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) New Media Communications	<b>Transaction ID:</b> SB21B-7123-21189-e <b>Date of Disbursement</b>																				
Mailing Address 3046 Brecksville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	0	9												
City Richfield State OH Zip Code 44286-9399	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website development & maintenance Candidate Name	<table border="1"> <tr> <td colspan="10">9696.00</td> </tr> </table>	9696.00																			
9696.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 001																					
<b>B.</b> Full Name (Last, First, Middle Initial) New Media Communications	<b>Transaction ID:</b> SB21B-7123-21192-e <b>Date of Disbursement</b>																				
Mailing Address 3046 Brecksville Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	6		2	0	0	9												
City Richfield State OH Zip Code 44286-9399	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Website contribution processing Candidate Name	<table border="1"> <tr> <td colspan="10">1.75</td> </tr> </table>	1.75																			
1.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 003																					
<b>C.</b> Full Name (Last, First, Middle Initial) Office of Tax and Revenue	<b>Transaction ID:</b> SB21B-4077-21167-e <b>Date of Disbursement</b>																				
Mailing Address PO Box 96385	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Washington State DC Zip Code 20090-6385	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Payroll taxes Candidate Name	<table border="1"> <tr> <td colspan="10">163.00</td> </tr> </table>	163.00																			
163.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 001																					

**SUBTOTAL** of Disbursements This Page (optional) .....

9860.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Whitaker Askew

Mailing Address 3044 R Street NW

City  
Washington

State  
DC

Zip Code  
20007-2962

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3802-21133-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

1377.57

**B.**

Full Name (Last, First, Middle Initial)

Whitaker Askew

Mailing Address 3044 R Street NW

City  
Washington

State  
DC

Zip Code  
20007-2962

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-3802-21168-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1377.56

**C.**

Full Name (Last, First, Middle Initial)

John Criscuolo

Mailing Address 1845 A Street SE

City  
Washington

State  
DC

Zip Code  
20003-1706

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10858-21134-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

191.06

**SUBTOTAL** of Disbursements This Page (optional) .....

2946.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

John Criscuolo

Mailing Address 1845 A Street SE

City  
Washington

State  
DC

Zip Code  
20003-1706

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10858-21169-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

191.06

**B.**

Full Name (Last, First, Middle Initial)

Johnny DeStefano

Mailing Address 1000 New Jersey Ave., SE  
#1011

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10021-21135-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

602.03

**C.**

Full Name (Last, First, Middle Initial)

Johnny DeStefano

Mailing Address 1000 New Jersey Ave., SE  
#1011

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B-10021-21170-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

602.04

**SUBTOTAL** of Disbursements This Page (optional) .....

1395.13

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-21136-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="443.54"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Curtis Isakson</p> <p>Mailing Address 1201 N Garfield Street Apt. 618</p> <p>City Arlington State VA Zip Code 22201-6812</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-11116-21171-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="443.54"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kevin McGrann</p> <p>Mailing Address 150 N Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003-1841</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-4052-21137-e <b>Date of Disbursement</b></p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p><b>Amount of Each Disbursement this Period</b></p> <p><input type="text" value="829.46"/></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <input type="text" value="1716.54"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <input type="text"/></p>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin McGrann	<b>Transaction ID:</b> SB21B-4052-21172-e <b>Date of Disbursement</b>																				
Mailing Address 150 N Carolina Avenue SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Washington State DC Zip Code 20003-1841	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">829.46</td> </tr> </table>	829.46																			
829.46																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Donald Seymour	<b>Transaction ID:</b> SB21B-10022-21138-e <b>Date of Disbursement</b>																				
Mailing Address 401 Holland Lane #609	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	4		2	0	0	9												
City Alexandria State VA Zip Code 22314	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1258.05</td> </tr> </table>	1258.05																			
1258.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Donald Seymour	<b>Transaction ID:</b> SB21B-10022-21173-e <b>Date of Disbursement</b>																				
Mailing Address 401 Holland Lane #609	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Alexandria State VA Zip Code 22314	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1258.05</td> </tr> </table>	1258.05																			
1258.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**3345.56**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

**A.**

Full Name (Last, First, Middle Initial)

Jessica Towhey

Mailing Address 618 N Carolina Avenue SE  
Apt. 3

City Washington State DC Zip Code 20003-4392

Purpose of Disbursement  
Consulting-copywriting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4392-21139-e  
Date of Disbursement

08 / 14 / 2009

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Jessica Towhey

Mailing Address 618 N Carolina Avenue SE  
Apt. 3

City Washington State DC Zip Code 20003-4392

Purpose of Disbursement  
Consulting-copywriting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-4392-21174-e  
Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

30377.02

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE

A.

Full Name (Last, First, Middle Initial)

Dede for Congress, Inc.

Mailing Address 63 Gleason Street

City State Zip Code  
Gouverneur NY 13642-1224

Purpose of Disbursement  
Contribution, Special General

Candidate Name  
Dierdre Scozzafava

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 23

Disbursement For: 2009  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Special

Transaction ID: SB23-11251-21157-e

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 24 / 24

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
FREEDOM PROJECT; THE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
VerizonNature of Debt (Purpose):  
Administrative/Salary/Ove-  
rhead-Telephone

Mailing Address PO Box 17577

City State ZIP Code  
Baltimore MD 21297-0513

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10-DEBT21195

Amount Incurred This Period

1365.93

Payment This Period

0.00

Outstanding Balance at Close of This Period

1365.93

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Wiley Rein LLPNature of Debt (Purpose):  
Administrative/Salary/Ove-  
rhead-Legal services

Mailing Address 1776 K Street NW

City State ZIP Code  
Washington DC 20006-2304

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10-DEBT21160

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

4365.93

2) **TOTALS** This Period (last page this line number only).....

4365.93

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

4365.93